



## MEMBERSHIP/DONATION FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Are you a *NEW* or *RENEWING* member? (*Circle one*)

Membership/Donation Levels (*Check one*):

\_\_\_\_\_ Individual - \$15

\_\_\_\_\_ Family - \$25

\_\_\_\_\_ Patron - \$50

\_\_\_\_\_ Contributing - \$100

\_\_\_\_\_ Supporting - \$250

\_\_\_\_\_ Benefactor - \$500

\_\_\_\_\_ Sponsor - \$1,000

\_\_\_\_\_ Other - \$ \_\_\_\_\_

Payment Method: \_\_\_\_\_ Check \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard

Credit Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ / \_\_\_\_\_

Signature \_\_\_\_\_

Please return the completed form to:  
Friends of the New Orleans Public Library  
219 Loyola Ave.  
New Orleans, LA 70112-2044